

CLAIMS ONLY							Application Number <b>10/645410</b>		Filing Date	
							Applicant(s)			
<b>1/3/05</b>							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/		/							
2			/							
3			/							
4			/							
5			/							
6			/							
7			/							
8			/							
9			/							
10			/							
11			/							
12			/							
13			/							
14			/							
15			/							
16			/							
17			/							
18			/							
19	/		/							
20	/		/							
21			/							
22			/							
23			/							
24			/							
25			/							
26			/							
27										
28										
29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
51										
52										
53										
54										
55										
56										
57										
58										
59										
60										
61										
62										
63										
64										
65										
66										
67										
68										
69										
70										
71										
72										
73										
74										
75										
76										
77										
78										
79										
80										
81										
82										
83										
84										
85										
86										
87										
88										
89										
90										
91										
92										
93										
94										
95										
96										
97										
98										
99										
100										
Total Indep	3		2				Total Indep			
Total Depend	22		13				Total Depend			
Total Claims	25		15				Total Claims			